

DECLARATION COMBINED WITH POWER OF ATTORNEY

Page 1 of 2
Attorney Docket No. 8284

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and join inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled MASK FOR DIFFERENTIAL CURING AND PROCESS FOR MAKING SAME the specification of which

(check one) ☒ is attached hereto.
☐ was filed on _____ as United States Application No. or
PCT International Application Serial No. _____
and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35 United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Serial No.	Filing Date	Application Serial No.	Filing Date

I hereby claim the benefit under Title 35 United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Associate Power
of Attorney Attached

Atty Name	Atty Reg Number.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Tara M. Rosnell	35,994	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Larry L. Huston	32,994	
Vladimir Vitenberg	42,204	
Julia A. Glazer	41,783	
Stephen T. Murphy	42,917	
Stephen W. Miller	31,984	
T. David Reed	32,931	
Timothy B. Guffey	41,048	
Eileen L. Hughett	34,352	
Emelyn L. Hiland	41,501	
Linda M. Sivik	44,982	

SEND CORRESPONDENCE TO:

Attorney or Agent's Name: Vladimir Vitenberg

The Procter & Gamble Company

(513) 634-7648

Company Name

Phone No.

6100 Center Hill Avenue

Cincinnati

Ohio

45224

Street

City

State

Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor, if any Michael Douglas Hill

Inventor's signature Michael Douglas Hill

Oct. 17, 2000

Date

Residence 1 Forest Drive, Tunkhannock, Pennsylvania 18657

Citizenship U.S.

Post Office Address 1 Forest Drive, Tunkhannock, Pennsylvania 18657

Full name of second joint inventor, if any Paul Dennis Trokhan

Inventor's signature _____

Date

Residence 1356 Warvel Road, Hamilton, Ohio 45013

Citizenship U.S.

Post Office Address 1356 Warvel Road, Hamilton, Ohio 45013

Full name of third joint inventor Larry Leroy Huston

Inventor's signature _____

Date

Residence 8141 Pepperwood Drive, West Chester, Ohio 45069

Citizenship U.S.

Post Office Address 8141 Pepperwood Drive, West Chester, Ohio 45069

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Attorney or Agent's Name: Vladimir Vitenberg

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Full name of sole or first joint inventor, if any Michael Douglas Hill

Inventor's signature _____

Date _____

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Citizenship U.S.

Post Office Address 1 Forest Drive, Tunkhannock, Pennsylvania 18657

Full name of second joint inventor, if any Paul Dennis Trokhan

Inventor's signature Paul Dennis Trokhan

10/10/00

Date

Residence 1356 Warvel Road, Hamilton, Ohio 45013

Citizenship U.S.

Post Office Address 1356 Warvel Road, Hamilton, Ohio 45013

Full name of third joint inventor Larry Leroy Huston

Inventor's signature Larry Leroy Huston

10/11/00

Date

Residence 8141 Pepperwood Drive, West Chester, Ohio 45069

Citizenship U.S.

Post Office Address 8141 Pepperwood Drive, West Chester, Ohio 45069

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of :
MICHAEL DOUGLAS HILL ET AL. : Confirmation No.
Serial No. : Group Art Unit
Filed: December 15, 2003 : Examiner

For MASK FOR DIFFERENTIAL CURING AND PROCESS FOR MAKING SAME

ASSOCIATE POWER OF ATTORNEY

Commissioner for Patents,
P. O. Box 1450,
Alexandria, VA 22313-1450

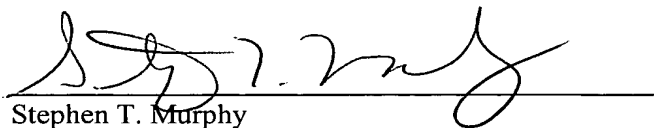
Dear Sir:

You are requested to recognize all attorneys associated with Customer Number 27752 of The Procter & Gamble Company, Cincinnati, Ohio, as Associate Attorneys or Agents, to prosecute this application, to make alterations and amendments therein, and to transact all business in the Patent Office connected with the application or with the patent granted thereupon.

Please address all future communications to:

Customer Number 27752

Respectfully submitted,



Stephen T. Murphy
Attorney for Applicant(s)
Registration No. 42,917
(513) 634-4268

Date: December 15, 2003

Customer No. 27752

(assocpwr.doc)
(Last Revise 10/10/2003)